

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL034010</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/08/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SHULER HEALTH CARE/PHILLIPS VILLA</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>250 PITT STREET KERNERSVILLE, NC 27284</b>
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C 000	<p>Initial Comments</p> <p>This report is of a Biennial Construction Survey done by Bob Getchell on January 8, 2016.</p> <p>This facility was first licensed or submitted as a Home for the Aged serving 12 ambulatory residents on October 4, 1979. Therefore the facility must meet the 1977 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1978 North Carolina State Building Code Section 409.1 Institutional Unrestrained Occupancy.</p> <p>Deficiencies were noted which will require a new plan of correction.</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS</p> <p>The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the building fire</p>	C 101		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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C 101	Continued From page 1  detection equipment was not installed in all spaces in accordance with the NC State Building Code in effect at the time of construction. This would affect all residents by not detecting smoke, activating the fire alarm, and directing residents from the building.  Findings include: a) The Med room has no smoke detection or heat detection tied into the fire alarm b) The corridor bathrooms have no smoke detection or heat detection tied into the fire alarm.	C 101		
C 111	Must Have Current San. & Fire Safety Reports  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION( f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.  This Rule is not met as evidenced by: 1. Based on observation, current reports were not available at the time of the survey.  Findings include: The Sanitation report for the building was not available at the time of the survey.	C 111		
C 150	Corridors-Free of equipment and Obstructions  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions.	C 150		

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C 150	Continued From page 2  This Rule is not met as evidenced by: 1. Based on observation, egress from all areas was not maintained in a safe manner by having corridors blocked by furniture. This would affect all residents by not allowing free egress in an emergency.  Findings include. The exit corridor has wall-mounted shelves and end tables extending into the corridor reducing the width of the corridor to less than 5 feet.	C 150		
C 164	Housekeeping and Furnishings-Clean, Repaired  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Based on observation, some building components were not maintained in clean, repaired condition.  Findings include: a) Throughout the building the HVAC return vents and their associated radiation dampers are covered with dust and dirt which could interfere with the damper activating properly in a fire emergency. b) A towel rack is broken in the tub room c) Room 6 has a worn chair	C 164		

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C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would affect all residents by not containing smoke and fire in the room or smoke compartment of origin.</p> <p>Findings include:</p> <p>a) The attic draft wall has a 2 foot by 2 foot section of gypsum cut out of it.</p> <p>b) The Pantry has an unprotected penetration in the wall at the water heater.</p> <p>c) Corridor ceiling fan at Dining room missing escutcheon</p> <p>d) The private closet ceiling next to the Laundry has unprotected penetrations</p> <p>e) Room 3 has an unprotected ceiling penetration by phone line, and a ceiling/wall joint is separating.</p> <p>2. Based on observation, the facility components were not maintained operable by having doors that did not close completely and latch.</p> <p>Findings include:</p> <p>a) Room 5 has a roller latch that does not work</p>	C 189		

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C 189	<p>Continued From page 4</p> <p>because it releases with less than 5 pounds of force.</p> <p>b) The left Exit door will not close and latch when released, and the door casing is damaged.</p> <p>c) The right Exit door will not close and latch when released</p> <p>d) The Living Room Exit door will not close and latch when released</p> <p>3. Based on observation, the building electrical system was not maintained to keep the facility safe by allowing residents to use two-wire extension cords and expansion blocks in the outlets. This would affect all residents by potentially overloading electrical circuits in the bedrooms.</p> <p>Findings include: Two-wire extension cords and outlet expansion devices were observed in the following locations: a) Room 3 has a two-wire extension cord, b) Room 4 has an outlet expansion device,</p> <p>4. Based on observation, the building illumination was not maintained operable.</p> <p>Findings include: a) The left Exit sign is not working on battery backup b) The light on the kitchen range hood is not working.</p> <p>5. Based on observation, the building fire protection equipment was not maintained to keep the facility safe. This would affect all residents by not detecting smoke, activating the fire alarm, and directing residents from the building.</p> <p>Findings include: a. The HVAC duct mounted smoke detectors in</p>	C 189		

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C 189	Continued From page 5  the attic have sample tubes that are not oriented properly with the holes facing towards the air flow.	C 189		